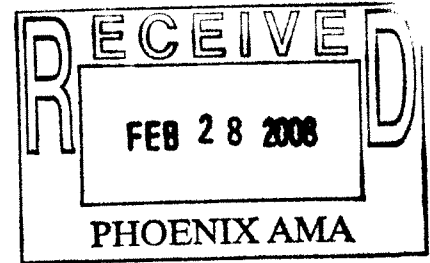


ARIZONA DEPARTMENT OF WATER RESOURCES
Groundwater Mgmt. Support – 500 North Third Street
Phoenix, Arizona 85004
Phone (602) 417-2470



MODIFICATION
APPLICATION FOR A RECOVERY
WELL PERMIT (§ 45-834.01) 74-586727.0007

APPLICATION FEE \$ 50.00 PER WELL FOR
THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL
THEREAFTER IS DUE UPON FILING

PERMIT FEE (SAME AS APPLICATION FEES), PLUS
NOTICE AND PUBLICATION FEES TO BE DETERMINED,
ARE DUE PRIOR TO ISSUANCE OF PERMIT

FOR OFFICE USE ONLY

Application No. 74-586724.0008

Date Received 2-28-08

1. Name of Permittee Town of Gilbert

| | | | |
|---------------------------------|----------------|----------------|--------------|
| <u>50 E. Civic Center Drive</u> | <u>Gilbert</u> | <u>Arizona</u> | <u>85296</u> |
| Mailing Address | City | State | Zip |

Contact Person Kathy Rall Telephone 480-503-6840 Fax 480-503-6405

2. Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Phoenix AMA, East Salt River Valley Subbasin

3. Name of the owner(s) of the land where the wellsites are located Town of Gilbert

Mailing address 50 E. Civic Center, Gilbert, Arizona 85296

(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).

4. Legal description of the land where water will be used NW1/4 / NW1/4 / SE1/4 / Section 12, T1S R6E
(quarter/quarter/quarter/section, township and range)

5. The recovered water will be used for Landscape irrigation and other non-potable uses

6. The recovery wells will be used to recover water stored pursuant to Water Storage Permit No. _____

or long-term storage account number 70-441143.0000

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form (see DWR application packet.) Attach supplement if needed.

[illegible]

8. Complete the following for each proposed well to be constructed.

[illegible]

I (We) Town of Gilbert, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

480-503-6840
Telephone

Kathy Rall
Signature of owner or authorized agent

Water Resources Administrator
Title

| | | | |
|---------------------------------|----------------|----------------|--------------|
| <u>50 E. Civic Center Drive</u> | <u>Gilbert</u> | <u>Arizona</u> | <u>85296</u> |
| Mailing Address | City | State | Zip |

STATE OF ARIZONA)
County of Maricopa) ss.

Subscribed and sworn to before me this 26th day of February, 2008.

Betty Ybarra
Notary Public

January 9th 2012
My commission expires:

